

10/559554

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)							SERIAL NO. 10/559554		FILING DATE				
							APPLICANT(S)						
10/05 CLAIMS													
	AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT			AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
1	/		/		/		51		/	/	/		
2		/		/		/	52	/		/		/	
3		/		/		/	53		/		/	/	
4		/		/		/	54		/		/	/	
5		/		/		/	55		/		/	/	
6		/		/		/	56		/		/	/	
7		/		/		/	57		/		/	/	
8		/		/		/	58		/		/	/	
9		/		/		/	59		/		/	/	
10		/		/		/	60		/		/	/	
11		/		/		/	61		/		/	/	
12		/		/		/	62	/					
13		/		/		/	63		/		/	/	
14		/		/		/	64		/		/	/	
15	/		/		/	/	65		/		/	/	
16		/		/		/	66		/		/	/	
17	/						67		/		/	/	
18	/						68		/		/	/	
19		/					69		/		/	/	
20		/					70		/		/	/	
21		/					71		/		/	/	
22		/					72	/					
23	/						73		/		/	/	
24	/						74		/		/	/	
25		/					75		/		/	/	
26		/					76		/		/	/	
27		/					77		/		/	/	
28		/					78		/		/	/	
29		/					79		/		/	/	
30		/					80		/		/	/	
31		/					81		/		/	/	
32		/					82		/		/	/	
33	/						83		/		/	/	
34	/						84		/		/	/	
35		/					85		/		/	/	
36		/					86		/		/	/	
37		/					87		/		/	/	
38		/					88		/		/	/	
39	/						89		/		/	/	
40	/						90		/		/	/	
41	/						91		/		/	/	
42	/						92		/		/	/	
43		/					93		/		/	/	
44		/					94		/		/	/	
45		/					95		/		/	/	
46		/					96		/		/	/	
47		/					97		/		/	/	
48		/					98		/		/	/	
49		/					99		/		/	/	
50		/					100		/		/	/	
TOTAL IND.		↓		↓		↓	TOTAL IND.	15	↓	3	↓	3	↓
TOTAL DEP.		←		←		←	TOTAL DEP.	57	←	3	←	17	←
TOTAL CLAIMS							TOTAL CLAIMS	72		6		20	